



State of New Hampshire 2009 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2009

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE

WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 01/12/2010

Business ID: 241810

William M. Gardner

Secretary of State

ROLAND E. BERUBE, LLC

34 MAIN STREET

PLAISTOW, NH 03865

ADDRESS OF PRINCIPAL OFFICE:

34 MAIN ST

PLAISTOW, NH 03865

REGISTERED AGENT AND OFFICE:

Berube, Roland E

12 Ordway Lane

Kingston, NH 03848

ENTITY TYPE: LLC

BUSINESS ID: 241810

STATE OF DOMICILE: NEW HAMPSHIRE

ACQUIRE OWN USE CONVEY LEASE SELL ETC. REAL & PERSONAL
PROPERTY

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐

The new mailing address

☐

The new principal office address

PO Box is acceptable.

MANAGERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT

A

NAME Roland E. Berube

STREET 34 Main St

CITY/STATE/ZIP Plaistow, NH 03865

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

MEMBERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS

B

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

To be signed by the manager, if no manager, must be signed by a member.

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Roland E. Berube

Please print name and title of signer:

Roland E. Berube

manager

1

manager

NAME

TITLE

FEE DUE: **\$150.00**

E-MAIL ADDRESS (OPTIONAL):



024181020091503

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

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